

DEPARTMENT OF HEALTH SERVICES

1800 3rd STREET, ROOM 100
P. O. BOX 942732
SACRAMENTO, CA 94234-7320
(916) 322-1086



CMSP Letter No.: 01-2
Issue Date: February 8, 2001

TO: All County Medical Services Program (CMSP) County Welfare Directors

SUBJECT: County Medical Services Program Use of the Medi-Cal Mail-In Application

The purpose of this letter is to advise counties of a recent CMSP decision on the use of the Medi-Cal Mail-In Application. On December 7, 2000, the CMSP Governing Board voted to test on a one-year "pilot" basis the use of the Medi-Cal Mail-In Application for CMSP applicants.

For this pilot period, potential CMSP beneficiaries will have the option of using the Medi-Cal Mail-In Application in lieu of the current application and statement of facts process for applying for CMSP. The one-year pilot will begin immediately.

If you have any questions concerning this change, please direct them to Ms. Tina Thomas, in the CMSP Unit, at (916) 327-4842.

A handwritten signature in cursive script, reading "Gail Winter".

Gail Winter, Chief
County Medical Services Program

cc: Ms. Tina Thomas
County medical Services Program
Department of Health Services
1800 3rd Street, Room 100
P.O. Box 942732
Sacramento, CA 94234-7320